



**U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT
BUREAU FOR HUMANITARIAN RESPONSE (BHR)
OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)**

**DEMOCRATIC REPUBLIC OF THE CONGO –
Complex Emergency**

(Revised) Information Bulletin #2, Fiscal Year (FY) 2001

May 11, 2001

Note: this Information Bulletin updates Information Bulletin #1, dated December 4, 2000.

Background

President Laurent-Desire Kabila was shot on January 16, 2001, and died in Harare, Zimbabwe on or around January 18, where he had been flown for emergency medical treatment. On January 26, the Congolese cabinet installed his son Joseph, an Army Major General and the head of the armed forces, as president.

The young president has publicly committed to fostering peace in the DRC. President Joseph Kabila has professed support for the Lusaka Peace Accords, signed in July-August 1999, including the facilitation of an inter-Congolese dialogue and a commitment to national elections. The governments of Angola, Namibia, Rwanda, Uganda, and Zimbabwe have agreed to disengage their troops from the front lines and the U.N. Observer Mission in the DRC (MONUC), mandated under the Lusaka Peace Accords, commenced deployment in March 2001. There have been some problems with the disengagement and fighting continues in parts of eastern DRC.

Numbers Affected

The United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) estimates that there are 2 million internally displaced persons (IDPs) in the Democratic Republic of the Congo (DRC). Of this total, approximately 1 million IDPs reside in North and South Kivu provinces, of which an estimated 80% in South Kivu are children.

According to the U.N. High Commissioner for Refugees (UNHCR), there are an estimated 331,980 refugees in the DRC: 178,265 from Angola, 20,000 from Burundi, 5,200 from the Republic of the Congo (ROC), 42,470 from Rwanda, 73,035 from Sudan, and 12,980 from Uganda. UNHCR reports that 338,433 refugees from the DRC have fled into neighboring countries: 114,436 into the United Republic of Tanzania, 83,680 into the Republic of Congo (ROC), and 56,000 into Zambia.

Current Situation

Developments in the Peace Process: On March 15, the signatory parties to the Lusaka Cease-Fire Agreement began the 14-day disengagement and redeployment of forces plan. The Security Council also tasked the parties to prepare and adopt a schedule for disarmament, demobilization, reintegration, and repatriation or resettlement of all armed groups to the conflict by May 15. The military forces of Rwanda and Uganda have committed to withdrawing from the DRC, and troops from Namibia, Angola, and Zimbabwe have disengaged 15 kilometers from the frontlines. The leader of the Uganda-backed Congolese Liberation Front (CLF) forces committed to pulling back from the front line on May 4. A tentative cease-fire has been punctuated by reports of sporadic fighting.

Of the 5,500-strong MONUC force, thus far 200 Uruguayan soldiers have been deployed to Kalemie, 260 Senegalese soldiers to Kananga, and 120 Moroccan soldiers to Kisangani. An additional 280 Senegalese troops are scheduled to deploy to Mbandaka and 200 Tunisian troops will be deployed to Kinshasa in May.

A U.N. Security Council (UNSC) report has accused regional actors within the Congolese conflict of exploiting the extensive natural resources of the DRC including diamonds, gold, timber, copper, columbium tantalite (coltan), and of prolonging the conflict in order to continue reaping financial benefit. On May 4, the UNSC extended the mandate of the panel for three months to continue to investigate allegations of natural resource exploitation by foreign combatants in the DRC.

Food Security Concerns: The U.N. World Food Program (WFP) estimates that one-third of the population, an estimated 16 million people of DRC's total population of 49 million, are vulnerable due to lack of food and disease. Approximately 4.3% of the total households in the DRC are chronically food insecure. Prolonged displacement among the majority of DRC's population, a result of continuing insecurity, has disrupted people's traditional coping mechanisms and contributes to chronic food insecurity. An April 2001 U.N. Food and Agriculture Organization (FAO) report declared that the future food outlook remains "bleak" in the DRC.

Cassava (or manioc) is currently the most important staple crop in the DRC, representing approximately 70% of the caloric intake for more than 37 million people. Its production has significantly decreased due to an increased prevalence of viral and bacterial diseases, the most damaging being new strains of cassava mosaic disease (CMD). Since 1997, USAID/OFDA has supported the development of CMD-resistant cassava varieties, including more than \$1 million provided to the International Institute of Tropical Agriculture (IITA). USAID/OFDA has also contributed to FAO programs this year to combat cassava diseases.

Health Concerns: Food insecurity is compounded by the long-term deterioration of the health care infrastructure system that has been eroded by the ongoing conflict. Pervasive looting of health centers' supplies in conflict zones and government neglect have exacerbated the health crisis. According to UNOCHA, 75% of the population lacks access to basic health care. Infant and maternal mortality rates are among the highest in the world. USAID has developed an 18-month health and humanitarian initiative that attempts to address the extensive health and food security needs in the DRC and mitigate the effects of the ongoing war.

Humanitarian Access: Kenzo Oshima, the U.N. Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, visited the DRC from April 5-11 to discuss continuing limited humanitarian access to vulnerable populations. President Kabila has promised unrestricted movement of humanitarian goods and personnel throughout the country, and during his visit, Under-Secretary-General Oshima obtained a tentative agreement to achieve a mechanism of dialogue between the Government and humanitarian actors in the DRC. As the conflict stabilizes and humanitarian access increases -- particularly in the disengagement zone -- contact with previously inaccessible populations has revealed high mortality and malnutrition rates among children and adults, which may likely reflect an increased need for both food and non-food emergency assistance. Initial results from non-governmental organization (NGO) assessments into East Orientale and northern Katanga province report high levels of malnutrition, disease, and impoverishment as a result of the continuing conflict. Results of the most recent report on mortality surveys by the International Rescue Committee (IRC) indicate that an estimated 2.5 million people may have died in the DRC between August 1998 and April 2001, with the majority of deaths caused by disease and malnutrition.

Continuing Insecurity: Fighting continues throughout the eastern half of the DRC between the anti-Kabila coalition (Rwanda, Uganda, and their allied rebel movements), radical Rwandan Hutu militia groups, and indigenous Congolese militia known as Mai-Mai. On April 26, six International Committee of the Red Cross (ICRC) staff members were killed in eastern Orientale (Ituri) Province. According to the World Food Program (WFP), relief organizations suspended their activities in South Kivu province between Bukavu and Bunyakiri as a result of the deteriorating security situation at the end of April. Recurring security incidents continue to hinder humanitarian access throughout the eastern DRC.

USG Assistance

The USG has been significantly involved in the ongoing humanitarian crisis in the DRC over the past five years. USG emergency assistance to the DRC's complex emergency totaled more than \$12 million in FY 1998, \$21 million in FY 1999, and \$32 million in FY 2000. During FY 2001, the USG is contributing approximately \$68 million to assist affected and vulnerable populations in the DRC.

USAID/OFDA: USAID/OFDA has planned approximately \$15.8 million for emergency programs in the DRC to date. USAID/OFDA has obligated \$8.1 million for the following programs: approximately \$2.9 million to AirServ to transport humanitarian aid and relief agency personnel; \$1,000,000 to the Interchurch Medical Association to strengthen the capacity of health zones throughout the country; more than \$2.9 million to the IRC to improve the health status of vulnerable populations throughout Oriental Province and decrease the vulnerability of displaced and war-affected populations in South Kivu province; \$1,000,000 to UNICEF for health programs country-wide; and \$77,000 to World Vision International (WVI) to assist doctors in reducing mortality rates and preventing unnecessary amputations among the war wounded in Goma, North Kivu Province; and \$290,000 for operational expenses related to the programs. The remaining \$7.7 million will support further emergency activities. USAID/OFDA also supports a Program Officer in Kinshasa and an Emergency Disaster Relief Coordinator (EDRC) in the DRC.

USAID/FFP: In FY 2001, USAID's Office of Food For Peace (BHR/FFP) has provided 13,720 MT of corn, pinto beans, peas, vegetable oil, and corn-soya blend (CSB) valued at \$10.9 million to WFP and the ICRC to assist vulnerable populations throughout the DRC.

USDA/FAS: In FY 2001, USDA/FAS has provided 24,500 MT of Section 416(b) food commodities (3,000 MT of vegetable oil and 21,500 MT of cornmeal) to WFP for the DRC, valued at approximately \$16.8 million.

USAID Africa Bureau: Out of an overall program of approximately \$16 million, the USAID Mission in Kinshasa has provided roughly \$14.7 million in child survival and disease funds to restore routine immunization programs, combat malaria, control the spread of HIV/AIDS and other infectious diseases, and develop a polio eradication program.

State/PRM: The Department of State's Bureau for Population, Refugees, and Migration (PRM) has provided \$10 million in Emergency Refugee and Migration Assistance (ERMA) funds. Of this total, UNHCR received \$3.5 to assist refugees within the DRC as well as Congolese refugees in neighboring countries and \$2.5 was provided to UNICEF for drug procurement in support of USAID's Rural Health (SANRU) program. UNOCHA received \$2 million for coordination activities and a quick impact fund, the ICRC received \$1.5 million for IDP assistance projects, and the U.N. Security Coordinator's Office (UNSECOORD) received \$500,000 to establish a security infrastructure for relief operations. In addition, State/PRM provided \$60 million to UNHCR and \$29 million to the ICRC for programs throughout Africa, a portion of which will be used in the DRC.

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|--------------------------------------|--------------|
| USAID/BHR/OFDA..... | \$8,085,188 |
| USAID/BHR/FFP | \$10,900,000 |
| USAID/AFR | \$14,700,000 |
| State/PRM..... | \$10,000,000 |
| USDA/FAS | \$16,800,000 |
| Total USG Emergency Assistance | \$60,485,188 |

USAID/OFDA bulletins can be obtained from the USAID web site at http://www.usaid.gov/hum_response/ofda/situation.html

NGO/IO ACTIVITIES

- ✈ Airlift
- 🔑 Coordination
- ✂ Food Security
- ⛑ Health/Immunizations
- 🏠 Livelihood
- ⚠ Natural Disaster Assistance
- 🍲 Nutrition
- 🚚 Plastic Sheeting/Vehicles/Transport
- 🌾 Seeds/Tools
- ☂ Umbrella Grant
- 👤 Vulnerable Children Bridge Grant
- 💧 Water

PROVINCE
REGION
City
PROGRAM

CENTRAL AFRICAN REPUBLIC

U.S. Agency for International Development (USAID)
Office of U.S. Foreign Disaster Assistance (OFDA)
4.3.2001

SUDAN

NORTH KIVU
GAA ✂
IMC ⛑
SCF/UK ⚠
UNOCHA 🔑

UGANDA

SOUTH KIVU
ACF ✂
FHI ✂
IRC ⛑
SCF/UK ⚠
UNOCHA 🔑

RWANDA

BURUNDI

TANZANIA

ZAMBIA



Bangui

Ubangi Region
IMA ⛑
WRC ⛑

Kisangani
IRC ⛑
UNOCHA 🏠

PROVINCE
ORIENTALE

Orientale

EQUATEUR

CONGO

Kinshasa
IRC ⛑
ACF ✂
CRS ⚠

Bandundu
IMA ⛑

Kole
CRS ⛑

Lodja
MERLIN ⛑

Kabare
IRC ⛑

MANIEMA
MERLIN ⛑

Bukavu
Uvira

Bunyakiri
SCF/UK 🏠

Kabinda
CRS 🏠

Kalemie
ACF ⛑
FHI ✂

KATANGA
FHI ✂

KASAI
OCCIDENTAL
IMA ⛑

KASAI
ORIENTAL
IMA ⛑

Kananga

Mbuji-Mayi

DEMOCRATIC
REPUBLIC OF
THE CONGO
UNICEF ⛑

IMA ⛑

Lubumbashi
ACF 🏠

EASTERN CONGO
AIR-SERV ✈

Cabinda
(ANGOLA)

BAS-CONGO
IMA ⛑

Brazzaville
KINSHASA

BANDUNDU

ATLANTIC
OCEAN

Luanda

ANGOLA

USAID/OFDA FUNDED NGO/IO ACTIVITIES
DEMOCRATIC REPUBLIC OF THE CONGO - MAY 2001

*Base map by United Nations Cartographic Section

**Boundaries compiled using secondary source materials.